

VIRGINIA DEPARTMENT OF TRANSPORTATION

MATERIALS DIVISION

NUCLEAR GAUGE TRANSFERRAL RECEIPT

District _____ Date _____

Project Number _____

I have assumed responsibility for the care and safekeeping of the following equipment:

Gauge Model Number _____ Gauge Serial Number _____

Additional Equipment; Hammer ☐ Yes ☐ No; Driving Pin ☐ Yes ☐ No

Battery Charger ☐ Yes ☐ No ; Leveling Plate ☐ Yes ☐ No

Standard Block ☐ Yes ☐ No

Print Name _____

Title _____

Address _____

Signature _____ Phone # _____

When the above equipment is returned to the custody of the State or District Materials Engineers Staff, have the individual sign below.

Signature _____

Title _____

Address _____

White - Central Office Materials Division

Yellow - District Materials Engineer

Pink - Person assuming responsibility